

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	<i>JS</i>		04 10 01
<b>O.I.P.E. CLASSIFIER</b>		43	5/4/01
<b>FORMALITY REVIEW</b>	<i>ER</i>	706	5-31-01
<b>RESPONSE FORMALITY REVIEW</b>			

BEST AVAILABLE COPY

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Final	Original	Date
1	✓	✓	11/6/01
2	✓	✓	2/6/02
3	✓	✓	7/2/02
4	✓	✓	6/19/02
5	✓	✓	9/24/02
6	✓	✓	2/2/03
7	✓	✓	2/2/03
8	✓	✓	2/2/03
9	✓	✓	2/2/03
10	✓	✓	2/2/03
11	✓	✓	2/2/03
12	✓	✓	2/2/03
13	✓	✓	2/2/03
14	✓	✓	2/2/03
15	✓	✓	2/2/03
16	✓	✓	2/2/03
17	✓	✓	2/2/03
18	✓	✓	2/2/03
19	✓	✓	2/2/03
20	✓	✓	2/2/03
21	✓	✓	2/2/03
22			
23			
24			
25			
26			
27			
28			
29			
30			
31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50			

Claim	Date			
Final Original				
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
64				
65				
66				
67				
68				
69				
70				
71				
72				
73				
74				
75				
76				
77				
78				
79				
80				
81				
82				
83				
84				
85				
86				
87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				

Claim	Date				
Final	Original				
101					
102					
103					
104					
105					
106					
107					
108					
109					
110					
111					
112					
113					
114					
115					
116					
117					
118					
119					
120					
121					
122					
123					
124					
125					
126					
127					
128					
129					
130					
131					
132					
133					
134					
135					
136					
137					
138					
139					
140					
141					
142					
143					
144					
145					
146					
147					
148					
149					
150					

If more than 150 claims or 10 actions  
staple additional sheet here